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MAR 30 2009

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27752 7590 03/20/2009

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Carolyn Bryan	(Depositor's name)
Carolyn Bryan	(Signature)
March 30, 2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/862,830	05/22/2001	John Gregory Schroeder	AA471	8865

TITLE OF INVENTION: KIT FOR CARING FOR A FABRIC ARTICLE 03/30/2009 MBELETE2 00000074 162480 09862830
 01 FC:1501 1510.00 DA
 02 FC:1504 300.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/22/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
DOUYON, LORNA M	1796	510-277000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
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<input checked="" type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	<input type="checkbox"/> David V. Upite
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(A) NAME OF ASSIGNEE

The Procter & Gamble Company

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cincinnati, Ohio

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature David V. Upite

Date March 30, 2009

Typed or printed name David V. UpiteRegistration No. 47,147

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Fax No. (571) 273-2885 Phone No. (571) 272-4200

FROM: Carolyn Bryan for David V. Upite (Typed or printed name of person signing Certificate)

Fax No. (513) 945-6868 Phone No. (513) 983-7598

Application No.: 09/862,830

Inventor(s): John Gregory Schroeder *et al.*

Filed: May 22, 2001

Docket No.: AA471

Confirmation No.: 8865

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